Indiana State Police Clandestine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	10/15/2013	Address:	3235 N Hardy Lake Rd	
Incident #:	13ISPC010377		Scottsburg, IN	
County:	Scott		47170	
Type of Laboratory Seizure (check one)		Seizure Location	Seizure Location (check all that apply)	
☑ Operational Lab☐ Chemical/Glassware/Equipment (only)☐ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:	
Items Found: Location (bedroom, kitchen, open air, etc) (check all that apply)				
Red Phosphorous/Iodine Reaction(s):				
Hydrochloric Acid Gas Generator(s):				
Flammable Solvents: <u>Xylene-Outbuilding Ph-7, Positive Solvent</u>				
Water Reactive Metal (Lithium): Outbuilding-Energizer Batteries				
Anhydrous Ammonia: Compressed Cylinder 100 lb Drager +Ammonia PH13				
Corrosive Acid: Sulfuric Acid Ph-1 Liquid Fire Outbuilding				
Corrosive Base:				
Other (item and location):				
Vehicle Information:				
Owner: VIN: Year:		Make: Model:		
☐ Yes ☑ No	age 18 discovered (check appropriate) (number present) not present but evidence they reside	Living condi unclean Estimated les occurring:	tions of home: clean disarray	
This report has been faxed* or emailed to the following agencies that serve the location:				
Fire Department City, Township or County Johnson Twp Fire Fax: 812-752-8400 Health Department County: Scott Co Fax: 812-752-6023 Department of Child Services Hotline: dcshotlinereports@dcs.in.gov Fax: 317-234-7595 or 317-234-7596				
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Zach Smith Phone 812-246-5424				

*This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of

scene processing.